Case 20-00694-dd Doc 13 Filed 02/27/20 Entered 02/27/20 16:09:24 Desc Main Document Page 1 of 58

Fill in this information to identify your case:					
Debtor 1	Eria Bridgeman				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA		
Case number	20-00694				
(if known)					

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		V	4-
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	150,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	160,147.71
	1c. Copy line 63, Total of all property on Schedule A/B	\$	310,147.71
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	117,495.03
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	60,108.00
	Your total liabilities	\$	177,603.03
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,368.98
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,579.63
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
	■ Yes		
7.	What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,548.64

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,814.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	22,814.00

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				Docu	ıment	Page 3 of 58			
Fill	in this info	ormation to identify yo	our case and th	nis filing:					
Deb	otor 1	Eria Bridgema	n						
L.		First Name		e Name		Last Name			
	otor 2 use, if filing)	First Name	Middle	e Name		Last Name			
Uni	ed States F	Bankruptcy Court for the	e DISTRICT	OF SOUT	TH CAROLI	NA			
	iou otatoo i	Samuapito Court for the							
Cas	e number	20-00694				_			☐ Check if this is an amended filing
Of	ficial F	orm 106A/B							
Sc	hedu	le A/B: Pro	perty						12/15
			<u> </u>	an assot o	nly once If	an asset fits in more than o	ne category lie	et the asset in	
_	No. Go to F		able interest in a	any resider	nce, building	, land, or similar property?			
1.1				What is	s the propert	y? Check all that apply			
	264 Edir		tion	= :	Single-family	home			ims or exemptions. Put
	Oli ect addres	Street address, if available, or other description				llti-unit building n or cooperative			I claims on Schedule D: as Secured by Property.
					Manufactured	d or mobile home	0		0
	Gaston	SC 2	29053-0000	= '	Land		Current va entire prop		Current value of the portion you own?
	City	State	ZIP Code	_	Investment p	roperty	\$1	50,000.00	\$150,000.00
				_	Timeshare Other				our ownership interest
				_		at in the property? Check one		(such as fee simple, tenancy by a life estate), if known.	
				= 1	Debtor 1 only	•			
	Lexingto	on			Debtor 2 only	,			
	County			_		Debtor 2 only	☐ Checl	t if this is com	munity property
						of the debtors and another you wish to add about this i	,	structions)	
					ty identificat		tem, such as ic	cai	
						1-083 purchased by d n county assessor.	b 11/19/03 f	or \$116,787	
						from Part 1, including a			\$150,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Desc Main

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Doc 13

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Deptor Ella Bi	lugeillail	Case number (ii known)	20-00094
10. Firearms Examples: Pistols	s, rifles, shotguns, ammunition, and	related equipment	
■ No	-,, . g,		
☐ Yes. Describe.			
11. Clothes Examples: Every □ No	day clothes, furs, leather coats, desi	gner wear, shoes, accessories	
Yes. Describe.			
	clothing and shoes		\$500.00
	ciotining and shoes		
12. Jewelry Examples: Every □ No ■ Yes. Describe.		ement rings, wedding rings, heirloom jewelry, watches, gems, ç	old, silver
			40-0
	wedding ring, ear rings	, necklace	\$250.00
13. Non-farm animal Examples: Dogs, ■ No □ Yes. Describe.	cats, birds, horses		
14. Any other person ■ No □ Yes. Give spec		not already list, including any health aids you did not list	
	value of all of your entries from Pa e that number here	art 3, including any entries for pages you have attached	\$7,821.00
Part 4: Describe Your	Financial Assets		
Do you own or have	any legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	y you have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petiti	on
institu		unts; certificates of deposit; shares in credit unions, brokerage l with the same institution, list each.	nouses, and other similar
□ No ■ Yes		Institution name:	
	17.1. Checking	Municipal Credit Union checking account ending in 4589 S02; balance as of 1.9.2020	\$250.00
	17.2. Savings	Municipal Credit Union savings account ending in 4589 S01; balance as of 1.9.2020	\$200.00
	17.3. Savings	South Carolina Federal Credit Union savings account ending in 6267 Suffix No. 00; balance as of 1.9.2020	\$5.00

Official Form 106A/B

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Deptor 1	Eria Bridgema	ın	Case number (if known)	20-00694
		17.4. Checking	South Carolina Federal Credit Union checking account ending in 6267 Suffix No. 71; balance as of 1.9.2020	\$253.00
Exa	mples: Bond funds, in	publicly traded stocks vestment accounts with bro	okerage firms, money market accounts	
■ No □ Ye	S	Institution or issuer	name:	
	publicly traded stoo t venture	ck and interests in incorpo	orated and unincorporated businesses, including an interest i	n an LLC, partnership, and
■ No □ Ye		mation about them		
	- '	Name of entity:	% of ownership:	
Neg	otiable instruments in -negotiable instrumer	clude personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	s. Give specific inforn	nation about them Issuer name:		
<i>Exai</i> □ No	•	A, ERISA, Keogh, 401(k), 4	103(b), thrift savings accounts, or other pension or profit-sharing pla	ans
■ Ye	s. List each account s	separately. Type of account:	Institution name:	
		South Carolina Retirement System	SC Retirement System; balance as of 1.16.2020	\$125,043.71
You	<i>mples:</i> Agreements w	deposits you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companie	s, or others
☐ Ye	S		Institution name or individual:	
23. Ann ı ■ No	,	a periodic payment of mone	ey to you, either for life or for a number of years)	
☐ Ye	s Issu	er name and description.		
	S.C. §§ 530(b)(1), 52	IRA, in an account in a q 9A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition prog	ram.
		tution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. Trus ■ No		re interests in property (o	other than anything listed in line 1), and rights or powers exerc	isable for your benefit
☐ Ye	s. Give specific infor	mation about them		
Exai ■ No	mples: Internet domai	in names, websites, procee	nd other intellectual property eds from royalties and licensing agreements	
	s. Give specific infor			
Exai ■ No	mples: Building permi		es perative association holdings, liquor licenses, professional licenses	;
	s. Give specific infor			
Money	or property owed to	you?		Current value of the portion you own? Do not deduct secured

Case 20-00694-dd **Doc 13** Filed 02/27/20 Entered 02/27/20 16:09:24 Desc Main Document Page 7 of 58 Case number (if known) 20-00694 Debtor 1 Eria Bridgeman claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Federal and State tax refund for 2019 tax year; expected but not received \$850.00 State/Federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ΠNο ■ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: universal life insurance policy through **NFS** \$3.000.00 TransAmerica; value as of 1.9.2020 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$129,601.71 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B Schedule A/B: Property page 5

■ No. Go to Part 6.□ Yes. Go to line 38.

37. Do you own or have any legal or equitable interest in any business-related property?

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		Document	Paye o ur s			
Det	otor 1	Eria Bridgeman		Case number (if known)	20-00694	
Par		escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.		
46.	Do you	u own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?		
	No.	Go to Part 7.				
	☐ Yes	s. Go to line 47.				
Par	t 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above			
ı	Examp ■ No	u have other property of any kind you did not already list ples: Season tickets, country club membership Give specific information	?			
54.		the dollar value of all of your entries from Part 7. Write th List the Totals of Each Part of this Form	at number here			\$0.00
55.	Part 1	1: Total real estate, line 2				\$150,000.00
56.	Part 2	2: Total vehicles, line 5	\$22,725.00		-	·
57.	Part 3	3: Total personal and household items, line 15	\$7,821.00			
58.	Part 4	4: Total financial assets, line 36	\$129,601.71			
59.	Part 5	5: Total business-related property, line 45	\$0.00			
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00			
62.	Total	personal property. Add lines 56 through 61	\$160,147.71	Copy personal property to	otal	\$160,147.71
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$	310.147.71

Official Form 106A/B Schedule A/B: Property page 6

\$310,147.71

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Fill in this information to identify your case:						
Debtor 1	Eria Bridgeman					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA			
Case number	20-00694					
(if known)					☐ Check if this is an	
					amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property Y	ou Claim as	Exempt
---------	--------------	------------	-------------	--------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption				
	ocheane A.B. that hata this property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	264 Edinfield Ct Gaston, SC 29053	\$150,000.00		\$57,751.99	S.C. Code Ann. §				
	Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787 Value based on county assessor. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(1)(a)				
	ordinary household goods, 4 couches, bookcase, desk, coffee	\$6,996.00		\$4,875.00	S.C. Code Ann. § 15-41-30(A)(3)				
	table, 2 end tables, TV, 2 computers, dinette set, 3 beds, 3 dressers, 2 chest of drawers, 3 mirrors, microwave, refrigerator, washing machine, dish washer, dryer, stove, Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)				
	ordinary household goods, 4	\$6,996.00		\$2,121.00	S.C. Code Ann. §				
	couches, bookcase, desk, coffee table, 2 end tables, TV, 2 computers, dinette set, 3 beds, 3 dressers, 2 chest of drawers, 3 mirrors, microwave, refrigerator, washing machine, dish washer, dryer, stove, Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(7) funded by unused hs				

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		-		
Brief description of the property and line on Schedule A/B that lists this property	portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Crie	ck only one box for each exemption.	
books, CDs, DVDs, artwork Line from Schedule A/B: 8.1	\$75.00		\$75.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
2.110 110.11 007.000.77 2.2			100% of fair market value, up to any applicable statutory limit	unused hs
clothing and shoes	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
Ellie liolii ouredate A.B.			100% of fair market value, up to any applicable statutory limit	unused hs
wedding ring, ear rings, necklace Line from Schedule A/B: 12.1	\$250.00		\$250.00	S.C. Code Ann. § 15-41-30(A)(4)
Ellie liolii ouredate A.B. 12.1			100% of fair market value, up to any applicable statutory limit	10-41-00(2)(4)
Savings: Municipal Credit Union savings account ending in 4589 S01;	\$200.00		\$200.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
balance as of 1.9.2020 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	unused hs
Savings: South Carolina Federal Credit Union savings account ending	\$5.00		\$5.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
in 6267 Suffix No. 00; balance as of 1.9.2020 Line from <i>Schedule A/B</i> : 17.3			100% of fair market value, up to any applicable statutory limit	unused hs
Checking: South Carolina Federal Credit Union checking account	\$253.00		\$253.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
ending in 6267 Suffix No. 71; balance as of 1.9.2020 Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	unused hs
South Carolina Retirement System: SC Retirement System; balance as of	\$125,043.71		100%	S.C. Code Ann. § 9-1-1680
1.16.2020 Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
South Carolina Retirement System: SC Retirement System; balance as of	\$125,043.71		100%	11 U.S.C. § 522(b)(3)(C)
1.16.2020 Line from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	
State/Federal: Federal and State tax refund for 2019 tax year; expected	\$850.00		\$850.00	S.C. Code Ann. § 15-41-30(A)(7) funded by
but not received Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	unused hs
universal life insurance policy through TransAmerica; value as of	\$3,000.00		100%	S.C. Code Ann. § 38-63-40(
1.9.2020 Beneficiary: NFS Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	

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Debtor	1 <u>Er</u>	ia Bridgeman	Case number (if known)	20-00694
	•	claiming a homestead exemption of more than \$170,350? to adjustment on 4/01/22 and every 3 years after that for cases filed on or	after the date of adjustment.)	
	No			
	Yes.	. Did you acquire the property covered by the exemption within 1,215 days	s before you filed this case?	
		No		
		Yes		

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		Document Page	• 12 c	of 58				
Fill in this info	rmation to identify you							
Debtor 1	Eria Bridgeman							
	First Name	Middle Name Last Nam	ne		-			
Debtor 2								
(Spouse if, filing)	First Name	Middle Name Last Nam	ne					
United States B	ankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA						
Case number	20-00694							
(if known)						_	if this is	an
						ameno	ed filing	
Be as complete a is needed, copy t number (if known	D: Creditors nd accurate as possible. he Additional Page, fill it de	Who Have Claims Securif two married people are filing together, both a but, number the entries, and attach it to this for	are equa	lly responsible for s	upply			
	_		.,					
☐ No. Che	ck this box and submit th	nis form to the court with your other schedule	es. You	have nothing else	to re	port on this form.		
Yes. Fill	in all of the information	below.						
Part 1: List	All Secured Claims							
2. List all secure	d claims. If a creditor has r	nore than one secured claim, list the creditor sepa	rately	Column A	C	olumn B	Column	ı C
for each claim. If	more than one creditor has	a particular claim, list the other creditors in Part 2 cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	th	alue of collateral at supports this aim	Unsection of the second of the	
2.1 Loander	oo.com	Describe the property that secures the claim:	:	\$90,211.07	0.	\$150,000.00	ii diriy	\$0.00
Creditor's Na	me	264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787				·		
Attn: Ba	ankruptcy Dept	Value based on county assessor.						
	owne Center Dr	As of the date you file, the claim is: Check all the apply.	ıat					
Foothill	Ranch, CA 92610	Contingent						
Number, Stre	et, City, State & Zip Code	☐ Unliquidated						
		☐ Disputed						
Who owes the	debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only		\square An agreement you made (such as mortgage	or secur	ed				
Debtor 2 only		car loan)						
Debtor 1 and	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)					
☐ At least one of	f the debtors and another	☐ Judgment lien from a lawsuit						
☐ Check if this community of	claim relates to a debt	Other (including a right to offset) Mortga	ige					

Last 4 digits of account number

8459

Opened 07/16 Last

Date debt was incurred Active 12/19

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Debtor 1 Eria Bridgeman		Case number (if known)	20-00694	
First Name Middle Na	ame Last Name			
2.2 Municipal Credit Union	Describe the property that secures the claim	s: \$350.00	\$250.00	\$100.00
Creditor's Name Attn: Bankruptcy	Checking: Municipal Credit Union checking account ending in 4589 S02; balance as of 1.9.2020 As of the date you file, the claim is: Check all the chair is the ch	hot		
Po Box 3205	apply.	Ilat		
New York, NY 10007	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Miles awas the debt2 O	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage car loan)	or secured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)		
At least one of the debtors and another	Judgment lien from a lawsuit	- d don-o-!tt		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ed deposit account		
Opened 9/03/96 Last Active 01/20	Last 4 digits of account number 0	206		
2.3 Nissan Motor Acceptance	Describe the property that secures the claim	n: \$26,933.96	\$22,725.00	\$4,208.96
Creditor's Name	2016 Nissan Murano 60,000 miles			
	FWD 4dr Platinum			
	VIN: 5N1AZ2MG3GN159102			
Attn: Bankruptcy	Value based on NADA clean retail.			
Po Box 660366	As of the date you file, the claim is: Check all tapply.	hat		
Dallas, TX 75266	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage	or secured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ase Money Security		
Opened 08/16 Last Date debt was incurred Active 12/19	Last 4 digits of account number 0	001		

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Debtor 1	Eria Bridge	man			Case number (if	known)	20-00694	
	First Name	Middle N	lame Last Name					
2.4 S ur	nrun, Inc.		Describe the property that secur	es the claim:	\$0	0.00	\$150,000.00	\$0.00
Credi	itor's Name		264 Edinfield Ct Gaston, S	SC 29053				
			Lexington County					
			TMS: 009024-01-083 purc	hased by				
			db 11/19/03 for \$116,787	-				
			Value based on county as	ssessor.				
PΩ	Box 4387		As of the date you file, the claim		_			
	rtland, OR 97	208	apply.					
			Contingent					
Numb	ber, Street, City, Sta	te & Zip Code	☐ Unliquidated					
			☐ Disputed					
Who owe	s the debt? Che	eck one.	Nature of lien. Check all that app	ly.				
Debtor	1 only		An agreement you made (such	as mortgage or	secured			
☐ Debtor	2 only		car loan)					
☐ Debtor	1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien,	mechanic's lien))			
☐ At least	t one of the debto	ors and another	☐ Judgment lien from a lawsuit					
	if this claim rela unity debt	ites to a	Other (including a right to offset	leasehol	ld interest in so	lar pane	els	
Date debt		lien filed 05/23/2016	Last 4 digits of account n	umber 903	Α			
Add the	dollar value of y	our entries in C	Last 4 digits of account no	umber here:	\$1	17,495.		
If this is	_		. •		-	17,495. 17,495.		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Do	ocument Page 1	.5 of 58	
Fill in th	is information to identify you	r case:			
Debtor 1	Eria Bridgeman				
	First Name	Middle Name	e Last Name		
Debtor 2					
(Spouse if, t	iling) First Name	Middle Name	e Last Name		
United S	tates Bankruptcy Court for the:	DISTRICT OF	SOUTH CAROLINA		
0					
(if known)	mber <u>20-00694</u>			r	☐ Check if this is an
,				,	amended filing
					Ŭ
	I Form 106E/F				
Sched	ule E/F: Creditors V	Vho Have U	nsecured Claims		12/15
any execu Schedule (Schedule (left. Attach	tory contracts or unexpired lease G: Executory Contracts and Unex D: Creditors Who Have Claims Se the Continuation Page to this pa case number (if known).	es that could result in the spired Leases (Office cured by Property. The sage. If you have no in the sage.	in a claim. Also list executory ial Form 106G). Do not include if more space is needed, copy information to report in a Part,	Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property (e any creditors with partially secured cly the Part you need, fill it out, number the donot file that Part. On the top of any	Official Form 106A/B) and on aims that are listed in ne entries in the boxes on the
Part 1:	List All of Your PRIORITY U				
_	y creditors have priority unsecur	ed claims against y	ou?		
_	o. Go to Part 2.				
☐ Ye	es.				
Part 2:	List All of Your NONPRIORI	TY Unsecured Cl	aims		
	y creditors have nonpriority unse				
_		•	-	and do	
_	o. You have nothing to report in this	part. Submit this for	n to the court with your other scr	ledules.	
■ Ye	es.				
unsec	ured claim, list the creditor separate one creditor holds a particular claim,	ely for each claim. Fo	r each claim listed, identify what	no holds each claim. If a creditor has more type of claim it is. Do not list claims alrea in three nonpriority unsecured claims fill or	dy included in Part 1. If more
					Total claim
4.1 E	Bank of America	La	st 4 digits of account number	2135	\$3,189.00
	Ionpriority Creditor's Name				
	1909 Savarese Circle F11-908-01-50	W	hen was the debt incurred?	Opened 01/17 Last Active 12/19	
	Tampa, FL 33634	•••	nen was the debt incurred:	12/13	
	lumber Street City State Zip Code	As	of the date you file, the claim	is: Check all that apply	
V	Vho incurred the debt? Check one) .			
	Debtor 1 only		Contingent		
[Debtor 2 only		Unliquidated		
[Debtor 1 and Debtor 2 only		Disputed		
[$oldsymbol{\square}$ At least one of the debtors and a	11001101	pe of NONPRIORITY unsecure	ed claim:	
	Check if this claim is for a con	illiullity	Student loans		
	lebt s the claim subject to offset?	rei	Doligations arising out of a sepport as priority claims	paration agreement or divorce that you did	not
	No		' '	ing plans, and other similar debts	
	☐Yes		Other. Specify Credit Car		
_		_			

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Case number (if known) 20-00694

Deptor	Eria Bridgeman		Case number (if known) 20-00694	
4.2	Comenitybank/New York	Last 4 digits of account number	4197	\$896.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 18215 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 04/16 Last Active 10/19 is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	lacksquare Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.3	EdFinancial Services	Last 4 digits of account number	1799	\$16,370.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 36008 Knoxville, TN 37930	When was the debt incurred?	Opened 09/11 Last Active 12/20/19	¥13,01333
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	
4.4	EdFinancial Services Nonpriority Creditor's Name	Last 4 digits of account number	1699	\$6,444.00
	Attn: Bankruptcy Po Box 36008 Knoxville, TN 37930	When was the debt incurred?	Opened 09/11 Last Active 12/20/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans	votion agreement of discourse that the Principles	
	ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	

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Debtor	1 Eria Bridgeman		Case number (if known) 20-00694	
4.5	Equifax	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Po Box 740241	When was the debt incurred?		
	Atlanta, GA 30374-0256 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Notice only		
4.6	Experian (www dispute) Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO Box 2002 Allen, TX 75013-2002	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice only		
4.7	Fortiva	Last 4 digits of account number	8223	\$9,377.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 105555	When was the debt incurred?	Opened 11/17 Last Active 12/19	
	Atlanta, GA 30348 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		

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Case number (if known) 20-00694

Deptoi	Eria Bridgeman		Case number (if known) 20-00694	
4.8	Innovis	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name PO Box 1689	When was the debt incurred?		
	Pittsburgh, PA 15230 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify notice only		
4.9	Internal Revenue Service (p)	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Centralized Insolvency Operation PO Box 7346	When was the debt incurred?		·
	Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Notice only	<u> </u>	
4.1	LendingClub	Last 4 digits of account number	7923	\$7,151.00
	Nonpriority Creditor's Name Attn: Bankruptcy 595 Market St, Ste 200 San Francisco, CA 94105	When was the debt incurred?	Opened 10/17 Last Active 11/22/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	Yes	■ Other, Specify Unsecured		

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Eria Bridgeman Case number (if known) 20-00694

Deb	or 1 Eria Bridgeman		Case number (if known) 20-00694	
4.1 1	Lexington County Tax Collector	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Lexington County Treasurer 212 S. Lake Drive Suite 101	When was the debt incurred?		-
	Lexington, SC 29072-3499 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ _{No}	\square Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Notice only	,	-
4.1 2	Lexington County Treasurer	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Lexington County 212 S. Lake Drive Suite 101	When was the debt incurred?		-
	Lexington, SC 29072-3499 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice only	,	-
4.1	Municipal Credit Union	Last 4 digits of account number	5800	\$5,310.00
3	Nonpriority Creditor's Name			
	Attn: Bankruptcy Po Box 3205 New York, NY 10007	When was the debt incurred?	Opened 09/96 Last Active 12/19	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	malana and attack to the	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		_

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Eria Bridgeman Case number (if known) 20-00694

Eria Bridgeman	Case number (if known) 20-00694	
S.C. Department of Revenue	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name PO Box 12265	When was the debt incurred?	
Columbia, SC 29211 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Notice only	
S.C. Department of Revenue		\$0.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
GEAR 300A Outlet Pointe Boulevard Columbia, SC 29210	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	Other. Specify Notice only	
S.C. Department of Revenue	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name Correspondence PO Box 125	When was the debt incurred?	
Columbia, SC 29214		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify notice only	

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Debt	or 1 Eria Bridgeman		Case number (if known) 20-00694	
4.1 7	Sc Federal Credit Un Nonpriority Creditor's Name	Last 4 digits of account number	0494	\$6,588.00
	Rivers Avenue Brch North Charleston, SC 29419	When was the debt incurred?	Opened 08/04 Last Active 12/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	lacksquare Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Synchrony Bank/Sams Club Nonpriority Creditor's Name	Last 4 digits of account number	2834	\$4,783.00
	Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/13 Last Active 11/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Trans Union	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name PO Box 1000	When was the debt incurred?		
	Chester, PA 19016 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify notice only		

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Debtor	1 Eria Brido	geman		Case nu	mber (if known)	20-00694	
4.2	-	nent of Education	Last 4 digits of account number				\$0.00
	Nonpriority Cred Federal Offs	set Unit	When was the debt incurred?				_
	PO Box 522 Greenville.						
	Number Street	City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
	_	the debt? Check one.	_				
	Debtor 1 onl	•	Contingent				
	☐ Debtor 2 onl☐ Debtor 1 and	•	☐ Unliquidated☐ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		is claim is for a community	☐ Student loans				
	debt	-	Obligations arising out of a sepa	aration agı	reement or divor	ce that you did not	
	No	bject to offset?	report as priority claims Debts to pension or profit-sharing	na nlane s	and other similar	dehte	
	■ No Yes		Other. Specify Notice only		and other similar	debis	
	Li res		Other. Specify	y			_
4.2	US Departm	nent of the Treasury	Last 4 digits of account number				\$0.00
		he Fiscal Service gement Services	When was the debt incurred?				_
	Birminghan	n, AL 35201	As a fall of the control of the all the	. 0			
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	■ Debtor 1 onl	ly	☐ Contingent				
	Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		is claim is for a community	☐ Student loans				
	debt Is the claim su	bject to offset?	Obligations arising out of a separeport as priority claims			•	
	No		Debts to pension or profit-sharing	•	and other similar	debts	
	☐ Yes		Other. Specify Notice only	У			_
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
5. Use the is tryith have in the notified	nis page only if y ng to collect fro more than one c ed for any debts	m you for a debt you owe to som creditor for any of the debts that y in Parts 1 or 2, do not fill out or s		n Parts 1	or 2, then list th	e collection agen	cy here. Similarly, if you
Part 4:		mounts for Each Type of Uns	ecured Claim s. This information is for statistical i	renorting	nurnosas only	28 II S C 8159 A	dd the amounts for each
	of unsecured cla		s. This information is for statistical i	cporting	purposes only.	20 0.0.0. g100. A	ad the dinoditis for each
	6a.	Domestic support obligations		6a.	Tot \$	al Claim 0.0	0
Total	ou.	Domocie capport congations		ou.	Ψ	0.0	<u>o</u>
claims from Pa	art 1 6b.	Taxes and certain other debts y	ou owe the government	6b.	\$	0.0	0
	6c.	Claims for death or personal inj	-	6c.	\$	0.0	
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.0	<u>0</u>
	6e.	Total Priority. Add lines 6a through	gh 6d.	6e.	\$	0.0	0
					Tot	al Claim	
Total	6f.	Student loans		6f.	\$	22,814.0	0_
claims							

Official Form 106 E/F

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Debtor 1 Eria	a Bridg	geman	Case no	umber (if known)	20-00694	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	37,294.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	60,108.00	

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Fill in this info	rmation to identify your	case:		
Debtor 1	Eria Bridgeman			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA	
Case number	20-00694			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Sunrun, Inc. PO Box 4387 Portland, OR 97208	Db has lease with Sunrun for solar panels; Db pays \$136.94 per month; lease expires 2036.

Case 20-00694-dd Doc 13 Filed 02/27/20 Entered 02/27/20 16:09:24 Desc Main Document Page 25 of 58

		Documer	ii Page 25 oi	28	
Fill in this	information to identify your	case:			
Debtor 1	Eria Bridgeman				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF SOUTH C	AROLINA		
Case num	ber 20-00694				
(if known)				_	Check if this is an amended filing
_	l Form 106H				
Sched	lule H: Your Code	ebtors			12/15
□ No ■ Yes		Ç.			As with order to the
	hin the last 8 years, have you a, California, Idaho, Louisiana,			? (Community property states and gton, and Wisconsin.)	territories include
	Go to line 3.				
⊔ Yes	s. Did your spouse, former spou	se, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only if	f that person is a guarante	or or cosigner. Make su	f your spouse is filing with you. ure you have listed the creditor of G). Use Schedule D, Schedule E	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZII	P Code		Column 2: The creditor to wh Check all schedules that apply	
2.4	Lynch Bridgemen			Cabadula D. Erra	
	Lynch Bridgeman 264 Edinfield Ct			☐ Schedule D, line ■ Schedule E/F, line 4.1	17
(Gaston, SC 29053			☐ Schedule G Sc Federal Credit Un	<u> </u>

Fill in this information to identify your case:	
Debtor 1 Eria Bridgeman	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA	
Case number 20-00694	Check if this is:
(If known)	☐ An amended filing
	A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I	MM / DD/ YYYY
Schodula I: Vour Incomo	42/

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	☐ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
employers.	Occupation	Registered Nurse	self-employed mechanic
Include part-time, seasonal, or self-employed work.	Employer's name	Lexington Medical Center	
Occupation may include student or homemaker, if it applies.	Employer's address	2720 Sunset Blvd West Columbia, SC 29169	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 8,551.53 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Eria Bridgema	n	_		Case	number (if known)	20	0-00694		
						Foi	r Debtor 1		For Debtor		
	Cop	y line 4 here		4		\$	8,551.53	_	non-filing s	0.00	
_	-					_	.,				
5.		all payroll deduc		_		Φ.	4 4 4 4		•		
	5a.		and Social Security deductions		a.	\$_ \$	1,774.11	-	\$	0.00	
	5b. 5c.	•	tributions for retirement plans ributions for retirement plans		b. c.	\$ \$	769.64 0.00		\$ \$	0.00	
	5d.	•	ments of retirement fund loans		d.	\$-	0.00	-	\$	0.00	
	5e.	Insurance			е.	\$-	638.80		<u> </u>	0.00	
	5f.	Domestic supp	ort obligations	5		\$	0.00		\$	0.00	
	5g.	Union dues		5	g.	\$	0.00	5	\$	0.00	
	5h.	Other deductio	ns. Specify:	5	h.+	\$_	0.00	+ 5	\$	0.00	
6.	Add	the payroll dedu	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$_	3,182.55		\$	0.00	
7.	Calc	ulate total month	nly take-home pay. Subtract line 6 from line 4.	7		\$_	5,368.98		\$	0.00	
8.	List 8a.		regularly received: m rental property and from operating a business, farm								
		Attach a stateme	ent for each property and business showing gross y and necessary business expenses, and the total								
		monthly net inco		8	a.	\$	0.00	ç	3 .	.000.00	
	8b.	Interest and div		8	b.	\$	0.00		\$	0.00	
	8c.	regularly receive	t payments that you, a non-filing spouse, or a dependen ve , spousal support, child support, maintenance, divorce	t							
			property settlement.	8	C.	\$	0.00	,	\$	0.00	
	8d.	Unemployment	t compensation	8	d.	\$_	0.00		\$	0.00	
	8e.	Social Security		8	e.	\$_	0.00		\$	0.00	
	8f.	Include cash ass that you receive	nent assistance that you regularly receive sistance and the value (if known) of any non-cash assistance, such as food stamps (benefits under the Supplemental ance Program) or housing subsidies.	e 8	f.	\$	0.00	(\$	0.00	
	8g.	Pension or reti		8	g.	\$_	0.00		\$	0.00	
	8h.	Other monthly	income. Specify:	8	h.+	\$_	0.00	+ {	\$	0.00	
9.	Add	all other income	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9	.	\$	0.00		\$	3,000.00	
10.		•	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$		5,368.98 + \$		3,000.00	= \$	8,368.98
11			r contributions to the expenses that you list in Schedule	~ <i>I</i>	_					i L	
11.	Inclu othe	ide contributions for r friends or relative not include any am	rom an unmarried partner, members of your household, you	r dep			. •	,	in Schedule	e <i>J.</i> +\$	0.00
40		46	and and an advance of the state								
12.		e that amount on t	ne last column of line 10 to the amount in line 11. The re the Summary of Schedules and Statistical Summary of Certa							\$	8,368.98
										Combin	
13.	Do y	ou expect an inc	rease or decrease within the year after you file this forn	1?						monthly	/ income
		Yes. Explain:	NFS was a self employed truck driver until Octo spine surgeries.	ber	20	19 d	ue to a back i	njur	ry and mu	Itiple lu	mbar
			NFS is currently working as a self-employed me income.	cha	nic	. Bu	siness incom	e o	n Schedu	le I is pr	rojected
			Db schedule I wage income based on 01/31/2020	0 pa	ysi	tub \	/TD.				

	in this informa	ation to identify yo	our case:						
Deb	tor 1	Eria Bridgen	nan				k if this is:		
Deb	otor 2					_	An amended filing	ving postpetition cha	ntor
	ouse, if filing)						13 expenses as of		ptei
	10		DIOTOL	OT OF OOUTH OADOUN!		_	MM / DD / \\		
Unite	ed States Bank	ruptcy Court for the	: DISTRI	CT OF SOUTH CAROLINA	<u> </u>		MM / DD / YYYY		
Case	e number 2	0-00694							
(If kr	nown)								
Of	fficial Fo	orm 106J							
Sc	chedule	J: Your	Exper	ises					12/15
info	ormation. If n		eded, atta	. If two married people an ch another sheet to this f n.					
Part	t 1: Desc	ribe Your House	hold						
1.	ls this a joi	nt case?							
	■ No. Go t	o line 2.							
	☐ Yes. Do e	es Debtor 2 live	in a separ	ate household?					
	ЦΥ	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.						☐ Yes	
								□ No	
					-			☐ Yes	
								□ No □ Yes	
								☐ Yes	
								⊔ No □ Yes	
3.	Do your ex	penses include		No				L res	
		of people other t	han $_{oldsymbol{\square}}$	Yes					
	yourself an	d your depende	nts?	103					
		nate Your Ongoi							
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp					
Incl	lude expense	es paid for with	non-cash	government assistance if	vou know				
the	value of suc	h assistance an		cluded it on Schedule I: Y			Your expe	2000	
(Ott	ficial Form 1	061.)					rour exp	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4. \$	-	0.00	
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a. \$		0.00	
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00	
		•		ıpkeep expenses		4c. \$		50.00	
_		eowner's associat				4d. \$		0.00	
5.	Additional	mortgage payme	ents for vo	our residence , such as hor	me equity loans	5. \$		0.00	

Deb	tor 1	Eria Bridgeman	Case num	ber (if known)	20-00694
6.	Utiliti	es:			
٥.	6a.	Electricity, heat, natural gas	6a.	\$	280.00
	6b.	Water, sewer, garbage collection	6b.	\$	100.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	175.00
	6d.	Other. Specify: Spectrum	6d.	\$	220.00
7.	Food	and housekeeping supplies		\$	700.00
8.		care and children's education costs	8.		0.00
9.	Cloth	ing, laundry, and dry cleaning	9.	· -	50.00
10.		onal care products and services	10.	\$	80.00
11.		cal and dental expenses	11.		110.00
12.		sportation. Include gas, maintenance, bus or train fare.		· —	
	Do no	ot include car payments.	12.	\$	250.00
13.	Enter	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Chari	table contributions and religious donations	14.	\$	0.00
15.	Insur				
		of include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	·	295.53
	15b.	Health insurance	15b.	·	0.00
		Vehicle insurance	15c.		360.00
		Other insurance. Specify:	15d.	\$	0.00
16.		5. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	•	fy: Car Taxes	16.	\$	32.65
17.		Ilment or lease payments:		_	
		Car payments for Vehicle 1	17a.	·	0.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify:	17c.	·	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	18.	c	0.00
10		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
19.		r payments you make to support others who do not live with you.	19.	Φ	0.00
20.	Specif	ry. real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		ur Incomo	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.	· -	0.00
		Homeowner's association or condominium dues	20e.		0.00
21			21.	•	50.00
۷١.		· · · · · · · · · · · · · · · · · · ·		+\$	
		Run payment for solar panels		· <u> </u>	136.49
		physical therapy (3 x's per week at \$30 per session)		+\$	390.00
	DR 8	tudent loan payments		+\$	299.96
22.	Calcu	llate your monthly expenses			
		Add lines 4 through 21.		\$	3,579.63
	22b. 0	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		Add line 22a and 22b. The result is your monthly expenses.		\$	3,579.63
	220.7	and the ZZa and ZZb. The result is your monthly expenses.		Ψ	3,379.03
23.	Calcu	late your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		8,368.98
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,579.63
	23c.	Subtract your monthly expenses from your monthly income.	220	œ.	4 789 35
		The result is your <i>monthly net income</i> .	23c.	\$	4,789.35
24.	For example modified	ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			ase or decrease because of a
	■ No				
		Explain here:			

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Fill in this inform	ation to identify your	case:			
Debtor 1	Eria Bridgeman				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA		
Case number 2	0-00694				
(if known)				☐ Check if this is an amended filing	
obtaining money		n connection with a bank		. Making a false statement, concealing property, in fines up to \$250,000, or imprisonment for up to	
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out ba	pankruptcy forms?	
■ No					
☐ Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form	
Under penalt	y of perjury, I declare	that I have read the sum	mary and schedules filed	ed with this declaration and	

Signature of Debtor 2

Date

that they are true and correct.

Date February 27, 2020

X /s/ Eria Bridgeman

Eria Bridgeman Signature of Debtor 1

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Fill ir	this info	mation to identify you	r case:			
Debto						
Debit	ווכ	Eria Bridgeman First Name	Middle Name	Last Name		
Debto						
(Spous	e if, filing)	First Name	Middle Name	Last Name		
Unite	d States B	ankruptcy Court for the:	DISTRICT OF SOUTH C	AROLINA		
Case	number	20-00694				
(if knov	vn)				_	theck if this is an mended filing
Sta	temen			duals Filing for B		4/19
inforn	nation. If		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Part '	Give	Details About Your Ma	arital Status and Where You	ı Lived Before		
1. V	Vhat is yo	ır current marital statı	ıs?			
	■ Marrie □ Not ma					
2. C	ouring the	last 3 years, have you	lived anywhere other than	where you live now?		
	.					
<u>-</u>	■ No □ Yes. L	st all of the places you l	ived in the last 3 years. Do n	ot include where you live now	<i>1</i> .	
	Debtor 1 F	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	No					
	Yes. M	lake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	2 Expla	ain the Sources of You	r Income			
F	ill in the to	tal amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,616.51	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debto	r 1 <u>Er</u> i	a Bridgen	nan		Cas	e number (if known)	20-00694	
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
		dar year: December	31, 2019)	■ Wages, commissions, bonuses, tips	\$102,406.21	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$79,053.00	☐ Wages, con	ımissions,	
				☐ Operating a business		☐ Operating a	business	
	st each s	•	he gross inco	se and you have income that yome from each source separat		•		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6. Aı □		Neither Deindividual During the	ebtor 1 nor E primarily for a 90 days befo Go to line 7		umer debts. Consumer debt Id purpose." d you pay any creditor a tota	l of \$6,825* or mo	ore?	
		Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/22 and every 3 years	nts for domestic support oblig nis bankruptcy case.	ations, such as cl	hild support a	nd alimony. Also, do
	Yes.	Debtor 1	or Debtor 2 o	or both have primarily consu ore you filed for bankruptcy, di	ımer debts.		·	
		□ _{No.}	Go to line 7	7 .				
		■ Yes	include pay	each creditor to whom you pai rments for domestic support ol this bankruptcy case.				
C	reditor'	s Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for
7	1 Steve	Club Cor enson St S ncisco, C		85	\$703.34	Unknown	☐ Mortgag ☐ Car ☐ Credit C ■ Loan Re	card

☐ Suppliers or vendors

☐ Other__

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Case number (if known) 20-00694

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Nissan Motor Acceptance Attn: Bankruptcy Po Box 660366 Dallas, TX 75266	10/25/2019	\$755.95	\$26,945.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other_	ord Dayment
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partne r more of their voting	rships of which y securities; and a	ou are a genera any managing a	l partner; corporation gent, including one fo
	No					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments or transfer a	ny property on a	account of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	itor's name
Pa 9.	t 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrupto	·	v lavanit agurt agt	ion or administ	rativo process	ing?
9.	List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, fo	oreclosed, garni	shed, attached	l, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	ı			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec. No Yes. Fill in the details.		luding a bank or fin	ancial institutio	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possessi	on of an assign	ee for the bene	fit of creditors, a
	■ No □ Yes					

Debtor 1 Eria Bridgeman

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694 Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Gaffney Law Firm, P.A. \$600; for \$40 credit report, \$310 Filing 12/04/2019 \$600.00 P.O. Box 3966 fee and \$250 Attorney Fees West Columbia, SC 29171-3966 david@gaffneylawfirm.com Allen Credit and Debt Counseling \$20 for credit counseling 11/29/2019 \$20.00 Agency 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do r include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and value of property transferred			any property or received or debts change	Date transfer was made	
	Person's relationship to you						
19.	lithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a eneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust Description and value of the property tr			orty transforr	ad	Date Transfer was	
	Name of trust	Description and value of the prope			erty transferred		
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your beneficial, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.						, ,	
	■ No						
	☐ Yes. Fill in the details.						
		est 4 digits of ecount number	Type of account or instrument		te account was sed, sold, oved, or nsferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
Part 9: Identify Property You Hold or Control for Someone Else							
	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe the property		Value	
Par	t 10: Give Details About Environmental Inform	,					
	the purpose of Part 10, the following definitions						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below.

Part 12: Sign Below

Name Address **Date Issued**

(Number, Street, City, State and ZIP Code)

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☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1	Eria Bridgeman					
Debtor 2 (Spouse, if filing)						
United States B	sankruptcy Court for the: District of South Carolina					
Case number (if known)	20-00694					

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					_	olumn A ebtor 1	Colum Debto non-fi	
Your gross wages, salary, t payroll deductions).	ips, bo	nuses, overtime	, and	commissions (before a	all \$	9,457.74	\$	0.00
Alimony and maintenance p Column B is filled in.	aymen	its. Do not include	e pay	ments from a spouse if	\$	0.00	\$	0.00
 All amounts from any source of you or your dependents, from an unmarried partner, mand roommates. Do not includy you listed on line 3. Net income from operating 	includ i embers de payn	ing child suppor of your househo	t. Inc ld, yc	lude regular contribution our dependents, parents,	s	0.00	\$	0.00
Net income from operating business, profession, or far		Debtor 1	ı	Debtor 2				
Gross receipts (before all deductions)	\$	482.50	\$_	2,633.89				
Ordinary and necessary operating expenses	-\$_	0.00	-\$_	2,025.49				
Net monthly income from a business, profession, or farm	\$	482.50	\$_	Copy 608.40 here		482.50	\$	608.40
6. Net income from rental and	other r	real property	Deb	tor 1				
Gross receipts (before all ded	uctions)	9	0.00				
Ordinary and necessary oper-	ating ex	penses	-9	0.00				
Net monthly income from rent	al or ot	her real property	\$	0.00 Copy here	->\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known) 20-00694

				Column A Debtor 1		Column B Debtor 2 o		
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the arthe Social Security Act. Instead, list it here:							
	For you		.00					
_	For your spouse		.00					
	Pension or retirement income. Do not include a benefit under the Social Security Act. Also, excepnot include any compensation, pension, pay, annuunited States Government in connection with a didisability, or death of a member of the uniformed spay paid under chapter 61 of title 10, then include does not exceed the amount of retired pay to whicif retired under any provision of title 10 other than	t as stated in the next sente uity, or allowance paid by the sability, combat-related inju- services. If you received an that pay only to the extent on you would otherwise be	ence, do ne ury or y retired that it	\$	0.00) \$	0.00	
10.	Income from all other sources not listed above Do not include any benefits received under the Screceived as a victim of a war crime, a crime again domestic terrorism; or compensation, pension, pa United States Government in connection with a didisability, or death of a member of the uniformed sources on a separate page and put the total belo	e. Specify the source and all ocial Security Act; payments at humanity, or internationary, annuity, or allowance paisability, combat-related injuservices. If necessary, list of	s al or id by the ıry or					
				\$	0.00	<u> </u>	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if ar	ıy.	+	\$	0.00	\$	0.00	
	Calculate your total average monthly income. A total each column. Then add the total for Column A total for	the total for Column B.	\$	9,940.24	+ \$	608.40	To	10,548.64 otal average onthly income
	Copy your total average monthly income from Calculate the marital adjustment. Check one:	line 11.					\$	10,548.64
	You are not married. Fill in 0 below.							
	☐ You are married and your spouse is filing wit	th vou. Fill in 0 below.						
	You are married and your spouse is not filing	-						
	Fill in the amount of the income listed in line dependents, such as payment of the spouse	11, Column B, that was NC						
	Below, specify the basis for excluding this incadjustments on a separate page.	come and the amount of inc	come dev	oted to each	purpo	se. If necessary	∕, list addi	tional
	If this adjustment does not apply, enter 0 bel	ow.	_					
			- \$ \$		_			
			- Ψ— +\$		_			
	Total		\$	0.00	_	Copy here=>		0.
14.	Your current monthly income. Subtract line 13	3 from line 12.					\$	10,548.64
15.	Calculate your current monthly income for th	e year. Follow these steps	s:					
	15a. Copy line 14 here=>						\$	10,548.64

Eria Bridgeman

Debtor 1

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Debtor 1	Eria Bridgeman	Case number (if known)	20-00694	
	Multiply line 15a by 12 (the number of months in a year).		X _	12
15	o. The result is your current monthly income for the year for this pa	rt of the form.	\$ <u> </u>	126,583.68

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Debt	or 1	Eria	Bridgeman		Case number (if known)	20-00694	
16	. Cal	culate	the median family income that applies to	you. Follow thes	se steps:		
	16a	. Fill ir	n the state in which you live.	sc			
	16b	Fill ir	n the number of people in your household.	2			
			the median family income for your state and		Id.		60,434.00
		To fi	nd a list of applicable median income amount uctions for this form. This list may also be ava	s, go online usin	g the link specified in the separate	······································	,
17			he lines compare?				
	17a	. L	Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do l	NOT fill out Calc	ulation of Your Disposable Income (C	Official Form 122	C-2).
	17b	. •	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14:	ulation of Your			
Par	t 3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(I	0)(4)		
18.	Cop	у уог	ur total average monthly income from line	11		\$	10,548.64
19.	con	end t	ne marital adjustment if it applies. If you are that calculating the commitment period under income, copy the amount from line 13.	e married, your s 11 U.S.C. § 1325	pouse is not filing with you, and you 5(b)(4) allows you to deduct part of yo	our	
	19a	. If the	e marital adjustment does not apply, fill in 0 or	line 19a.		- \$	0.00
	19b	Sub	tract line 19a from line 18.			\$	10,548.64
20.	Cal	culate	your current monthly income for the year	. Follow these s	teps:		
	20a	Copy	y line 19b				10,548.64
		Multi	iply by 12 (the number of months in a year).				x 12
	20b	The	result is your current monthly income for the	ear for this part	of the form	:	126,583.68
	20c	Copy	y the median family income for your state and	size of househo	old from line 16c		60,434.00
	21	Цол	do the lines compare?			L	
	۷۱.	_	·				
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by th	ne court, on the top of page 1 of this f	form, check box	3, The commitment
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise	ordered by the court, on the top of pa	age 1 of this form	, check box 4, The
Par	t 4:	Sig	gn Below				
	Bys	ı signinç	g here, under penalty of perjury I declare that	the information o	on this statement and in any attachme	ents is true and	correct.
)	(/s/	Eria	Bridgeman				
	Er	ia Br	idgeman				
	•	•	e of Debtor 1				
	Dall		bruary 27, 2020 I / DD / YYYY				
	If yo	u che	cked 17a, do NOT fill out or file Form 122C-2				
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with	this form. On line	e 39 of that form, copy your current n	nonthly income f	om line 14 above.

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						_			
Fill in	this info	ormation to ic	lentify your case	e:					
Debto	r 1	Eria Bridge	eman						
Debtoi (Spous	r 2 se, if filin	g)							
United	States E	Bankruptcy Co	urt for the: Distr	ict of South Card	olina				
Case r	number wn)	20-00694					Check if thi	s is an amende	d filing
	ı Form 1 P ter		ulation of	Your Dis	sposable l	ncome			04/19
			need your comp I Form 122C-1).	oleted copy of C	Chapter 13 Statem	ent of Your Current	Monthly Inco	me and Calculatio	on of
space	is neede	ed, attach a se		this form, Includ	de the line numbe	ether, both are equa er to which additiona			
Part 1	: Ca	Iculate Your I	Deductions from	Your Income					
the	questio	ns in lines 6-1		S standards, go	online using the	for certain expense a link specified in the			
exp	enses if	they are highe	r than the standar	ds. Do not includ	de any operating e	pense. In later parts of expenses that you subto 's income in line 13 of	racted from inc	come in lines 5 and	
If yo	our exper	nses differ fron	n month to month	, enter the avera	ge expense.				
Note	e: Line n	umbers 1-4 ar	e not used in this	form. These num	nbers apply to info	rmation required by a	similar form us	ed in chapter 7 ca	ses.
5.	The nu	mber of peop	le used in deteri	mining your dec	ductions from inc	ome			
	plus the	e number of ar		ndents whom yo		federal income tax ret mber may be different		2	
Nat	ional Sta	andards	You must use	the IRS Nationa	al Standards to ans	swer the questions in li	nes 6-7.		
6.			other items: Usir lollar amount for f			ed in line 5 and the IRS	S National	\$	1,288.00
7.	the doll people	ar amount for who are 65 or	out-of-pocket hea olderbecause o	lth care. The nur lder people have	mber of peoplé is s	entered in line 5 and the plit into two categories vance for health car cone 22.	speople who	are under 65 and	

Official Form 122C-2

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Eria Bridgeman 20-00694 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 110.00 Copy here=> 110.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 110.00 Copy total here=> \$ 110.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 594.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 873.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Loandepo.com 1,018.47 Loandepo.com 33.95 Copy Repeat this amount 1,052.42 1.052.42 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 here=> or rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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ebtor 1	Eria Bridgeman				Case number (if knov	vn) 20-	00694	
11.	Local transportation expenses:	Check the number of vehic	les for whic	h you claim a	n ownership or	operating	expense.	
	☐ 0. Go to line 14.							
	■ 1. Go to line 12.							
	☐ 2 or more. Go to line 12.							
12.	Vehicle operation expense: Using operating expenses, fill in the <i>Operating</i> expenses, fill in the <i>Operating</i> expenses.							210.00
13.	Vehicle ownership or lease experse you may not claim the expense if you more than two vehicles.							
Ve		016 Nissan Murano 60 N1AZ2MG3GN159102						
13a.	. Ownership or leasing costs using I	RS Local Standard			\$5	08.00		
13b.	. Average monthly payment for all de	ebts secured by Vehicle 1.						
	Do not include costs for leased veh	icles.						
	To calculate the average monthly pare contractually due to each secundant bankruptcy. Then divide by 60.				:			
	Name of each creditor for V	ehicle 1	Average r	nonthly				
	Nissan Motor Acceptanc	е	\$	436.70				
] _		Repeat this	
	Total Ave	rage Monthly Payment	\$	436.70	Copy here => -\$	436	amount on	
13c.	. Net Vehicle 1 ownership or lease e	xpense					Copy net	
	Subtract line 13b from line 13a. if the	nis number is less than \$0,	enter \$0		\$	71.30	Vehicle 1 expense here => \$ _	71.30
Ve	hicle 2 Describe Vehicle 2:						J	
13d.	Ownership or leasing costs using l					0.00		
13e.	. Average monthly payment for all de leased vehicles.	ebts secured by Vehicle 2.	Do not inclu	ude costs for				
	Name of each creditor for V	ehicle 2	Average r	monthly				
			\$					
					Сору		Repeat this	
	Total ave	rage monthly payment	\$		here => -\$	0.00	amount on line	
13f.	Net Vehicle 2 ownership or lease e	xpense					Copy net	
	Subtract line 13e from line 13d. if the	nis number is less than \$0,	enter \$0		\$	0.00	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: In Public Transportation expense a						the \$	0.00
15.	Additional public transportation also deduct a public transportation not claim more than the IRS Local	expense, you may fill in wl	hat you beli					0.00

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		sted above,	you are allowed your monthly expenses	s for	
16.	self-employment taxes, soc your pay for these taxes. He	ial security taxes, and Medic owever, if you expect to rece om the total monthly amount	are taxes. \ive a tax re	∕ou may incl fund, you mı	I local taxes, such as income taxes, ude the monthly amount withheld from ust divide the expected refund by 12 or taxes.	\$	1,774.12
17.	·	he total monthly payroll ded	uctions that	your job req	uires, such as retirement		
	contributions, union dues, a	and uniform costs.				\$	769.64
10	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are					Ψ	
18.	filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					\$	295.53
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 						0.00
					ou will list these obligations in line 35.	\$	
20.	as a condition for your jo	nly amount that you pay for ϵ	ducation th	at is either r	equired:		
			child if no	nublic educa	tion is available for similar services.	\$	50.00
21					tting, daycare, nursery, and preschool.	Ψ_	
۷۱.		r any elementary or seconda		•	tiling, daycare, hursery, and prescribor.	\$	0.00
22.	 Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 						
	Payments for health insurance or health savings accounts should be listed only in line 25.						280.00
23.	33. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	nse allowa	nces.		\$	5,442.59
Add	itional Expense Deduction	These are additional d					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, o	r	
	Health insurance		\$	638.80			
	Disability insurance		\$	0.00			
	Health savings account		- \$	0.00			
	3	•	Φ		1		
	Total	•	\$	638.80	Copy total here=>	\$	638.80
		total amount?			Copy total here=>	\$	638.80
	Total Do you actually spend this	total amount?			Copy total here=>	\$	638.80
26.	Total Do you actually spend this is No. How much do y Yes Continued contributions to continue to pay for the reas your household or member	total amount? ou actually spend? to the care of household o	\$s r family me and support o is unable	mbers. The of an elderl to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of ich expenses. These expenses may	\$	638.80
	Total Do you actually spend this to No. How much do you Yes Continued contributions to continue to pay for the reasyour household or member include contributions to an approtection against family	total amount? ou actually spend? to the care of household o onable and necessary care of your immediate family wh account of a qualified ABLE violence. The reasonably ne	\$sramily me and support o is unable orogram. 26 ecessary me	mbers. The of an elderl to pay for su U.S.C. § 52 onthly exper	actual monthly expenses that you will y, chronically ill, or disabled member of ich expenses. These expenses may		

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00	Eria Bridgeman	Case number (ii	f known)	20-00	694		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and ope	erating	expenses	on		
	If you believe that you have home energy or 8, then fill in the excess amount of home en	osts that are more than the home energy costs include ergy costs	ed in ex	penses o	n line		
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that ry.	the ad	lditional		\$	0.00
		ren who are younger than 18. The monthly expense pendent children who are younger than 18 years old to					
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain w ot already accounted for in lines 6-23.	hy the	amount			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after the da	ate of a	djustment	t.	\$	0.00
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		onal allowance, go online using the link specified in th o be available at the bankruptcy clerk's office.	e sepa	rate			
	You must show that the additional amount o	slaimed is reasonable and necessary.				\$	0.00
	 Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). 						
	Do not include any amount more than 15% of your gross monthly income.						
	32. Add all of the additional expense deductions. Add lines 25 through 31.						
Dedi	ictions for Debt Payment						
33. F	pans, and other secured debt, fill in lines	33a through 33e.					
lo T	o calculate the total average monthly paymereditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each	secure	ed	A	verage (monthly
lo T	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home	ent, add all amounts that are contractually due to each	secure	ed		verage i	monthly
T cı	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home	ent, add all amounts that are contractually due to each				ayment	
T cı	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home	ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.			pa	ayment	
10 T cı 33a.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.			pa	ayment	
T cr 33a.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.		:	=> \$	ayment	,052.42
10 CI 33a.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.		:	=> \$ => \$	ayment	436.70
33a. 33b. 33c. 33d.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.	Doe	es payme	pa pa	ayment	,052.42 436.70
33a. 33b. 33c. 33d.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually due to each akruptcy. Then divide by 60. Identify property that secures the debt 264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787	Doe incl or i	es payme ude taxes nsurance′	pa	ayment	436.70 0.00
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33a. 33b. 33c. 33d.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually due to each akruptcy. Then divide by 60. Identify property that secures the debt 264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787	Doe incl or i	es payme ude taxes nsurance′	pa	ayment	436.70 0.00
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33a. 33b. 33c.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually due to each akruptcy. Then divide by 60. Identify property that secures the debt 264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787	Doe incl or in	es payme ude taxes nsurance' No Yes No Yes	pa	ayment	436.70 0.00
33a. 33b. 33c.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually due to each akruptcy. Then divide by 60. Identify property that secures the debt 264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787	Doe incl or in	es payme ude taxes nsurance' No Yes No Yes	pa	ayment	436.70 0.00
33a. 33b. 33c.	o calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually due to each akruptcy. Then divide by 60. Identify property that secures the debt 264 Edinfield Ct Gaston, SC 29053 Lexington County TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787	Doe incl or in	es payme ude taxes nsurance' No Yes No Yes	pa	ayment	436.70 0.00

Eria Bridgeman 20-00694 Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. ■ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 264 Edinfield Ct Gaston, SC 29053 **Lexington County** TMS: 009024-01-083 purchased by db 11/19/03 for \$116,787 Loandepo.com $3.145.56 \div 60 = $$ 52.43 Value based on county assessor. $\div 60 = \$$ \$ $\div 60 = +$ \$ Сору total 52.43 52.43 Total \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 \$ 0.00 36. Projected monthly Chapter 13 plan payment 2,900.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 10.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 290.00 290.00 here=> Average monthly administrative expense 1,968.04 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 5,442.59 expense allowances Copy line 32, All of the additional expense deductions 638.80 Copy line 37, All of the deductions for debt payment 1,968.04 8,049.43 8,049.43 Total deductions..... \$ Copy total here=>

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Debtor 1 E	ria Bridgema	an		Case	number (if known)	20-00694	
Part 2:	Determine You	ur Disposable Income Under	11 U.S.C. § 1325(b)(2	2)			
		rrent monthly income from lin Current Monthly Income and				\$	10,548.64
child ı disabi receiv	ren. The month ility payments f ved in accordar	oly necessary income you rec nly average of any child support or a dependent child, reported i nce with applicable nonbankrupt ended for such child.	payments, foster care n Part I of Form 1220	e payments, or c-1, that you	\$	0.00	
emplo in 11	oyer withheld fr	retirement deductions. The moom wages as contributions for contributions for contributions all required repayment contributions (c. § 362(b)(19).	ualified retirement pla	ans, as specified	\$	0.00	
42. Total	of all deduction	ons allowed under 11 U.S.C. §	707(b)(2)(A). Copy li	ine 38 here=>	\$ 8,0	049.43	
exper their e	nses and you ha	ial circumstances. If special ci ave no reasonable alternative, of must give your case trustee a colocumentation for the expenses	describe the special c etailed explanation of	ircumstances and			
Describe	the special ci	rcumstances		Amount of expen	ise		
D	b's student l	oan payments	\$	229.	99		
_			\$				
_			\$				
			Total \$	229.99	Copy here=> \$	229.99	
44. Total	adjustments.	Add lines 40 through 43.		=> \$	8,279.4	Copy here=> -\$	8,279.42
	-	nthly disposable income unde	r § 1325(b)(2). Subtra	act line 44 from lin	e 39.	\$	2,269.22
have time y you fil	changed or are your case will b led your petition	or expenses. If the income in Fe virtually certain to change after e open, fill in the information be n, check 122C-1 in the first colu in when the increase occurred,	the date you filed yo low. For example, if th mn, enter line 2 in the	ur bankruptcy peti ne wages reported e second column,	tion and during the street increased after		
Form	Line	Reason for change		Date of change	Increase or decrease?	Amount of cha	nnge
☐ 122C-1 ☐ 122C-2 ☐ 122C-2 ☐ 122C-2 ☐ 122C-2 ☐ 122C-2 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2	2 2 2				☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Increase	\$ \$ \$	

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Debtor 1	Eria Bridgeman	Case number (if known)	20-00694
Part 4:	Sign Below		
В	By signing here, under penalty of perjury you declare that the inform	mation on this statement and in any atta	achments is true and correct.
_	/s/ Eria Bridgeman Eria Bridgeman Signature of Debtor 1		
_	February 27, 2020		

Debtor 1 Eria Bridgeman Case number (if known) 20-00694

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2019 to 01/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Lexington Medical Center

Income by Month:

6 Months Ago:	08/2019	\$10,229.37
5 Months Ago:	09/2019	\$8,086.10
4 Months Ago:	10/2019	\$7,550.98
3 Months Ago:	11/2019	\$9,608.29
2 Months Ago:	12/2019	\$9,431.10
Last Month:	01/2020	\$11,840.57
	Average per month:	\$9,457.74

Line 5 - Income from operation of a business, profession, or farm

Source of Income: self-employed mechanic

Income/Expense/Net by Month:

•	Date	Income	Expense	Net
6 Months Ago:	08/2019	\$0.00	\$0.00	\$0.00
5 Months Ago:	09/2019	\$0.00	\$0.00	\$0.00
4 Months Ago:	10/2019	\$0.00	\$0.00	\$0.00
3 Months Ago:	11/2019	\$0.00	\$0.00	\$0.00
2 Months Ago:	12/2019	\$1,315.00	\$0.00	\$1,315.00
Last Month:	01/2020	\$1,580.00	\$0.00	\$1,580.00
	Average per month:	\$482.50	\$0.00	
			Average Monthly NET Income:	\$482.50

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Debtor 1 Eria Bridgeman Case number (if known) 20-00694

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 08/01/2019 to 01/31/2020.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Island Transport LLC (self-employed)

Income/Expense/Net by Month:

•	Date	Income	Expense	Net
6 Months Ago:	08/2019	\$5,267.78	\$4,050.98	\$1,216.80
5 Months Ago:	09/2019	\$5,267.79	\$4,050.98	\$1,216.81
4 Months Ago:	10/2019	\$5,267.78	\$4,050.98	\$1,216.80
3 Months Ago:	11/2019	\$0.00	\$0.00	\$0.00
2 Months Ago:	12/2019	\$0.00	\$0.00	\$0.00
Last Month:	01/2020	\$0.00	\$0.00	\$0.00
_	Average per month:	\$2,633.89	\$2,025.49	
			Average Monthly NET Income:	\$608.40

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 20-00694-dd Doc 13 Filed 02/27/20 Entered 02/27/20 16:09:24 Desc Main Document Page 56 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of South Carolina

In re	Eria Bridgeman	Case No.	20-00694	
	Debtor(s)	Chapter	13	-
	DISCLOSURE OF COMPENSATION OF ATT	ORNEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the a compensation paid to me within one year before the filing of the petition in bankrup be rendered on behalf of the debtor(s) in contemplation of or in connection with the	otcy, or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept	\$	3,700.00	
	Prior to the filing of this statement I have received	\$	250.00	
	Balance Due	\$	3,450.00	
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation with any other per	rson unless they are meml	pers and associates of my law firm	
	☐ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing in			
6.	In return for the above-disclosed fee, I have agreed to render legal service for all as	pects of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in b. Preparation and filing of any petition, schedules, statement of affairs and plan w c. Representation of the debtor at the meeting of creditors and confirmation hearing d. [Other provisions as needed] 	hich may be required;		
7.	By agreement with the debtor(s), the above-disclosed fee does not include the follow Mortgage Loan Loss Mitigation and Modification Applications: - Judge Duncan - \$1,500.00; - Judge Waites - \$1,700.00 for Portal Process; or \$300.00 for	-		
	Add Creditors after signing and before bar date \$50.00 Additional services not separately itemized and excluded in fee Additional services not separately itemized and excluded in fee Address Changes \$50.00 Adversary proceedings EXCLUDED AND NEGOTIATED Amendments due to incomplete or inaccurate information from Appeals EXCLUDED AND NEGOTIATED Application for Settlement \$150.00 Application to Employ \$150.00 Attend hearing on motion to reconsider \$200.00 Consent Order Approving Loan Modification \$250.00 Consent Order Lifting Stay to Proceed in Family Court \$250.00	e agreement \$75.00 hr	. paralegal	

Continuation of First Meeting of Creditors \$50.00

Defense of Trustee's Petition to Dismiss \$200.00

Defense of Motion for Relief from Automatic Stay (no hearing) \$300.00 Defense of Motion for Relief from Automatic Stay no ins. w/o hrg \$125.00 Defense of Motion for Relief from Automatic Stay with hearing \$400.00 Defense of Motion to Dismiss by Creditor after confirmation \$200.00

Conversion to Chapter 13 NEGOTIATED

Convert to Chapter 7 \$550.00 Creditor Violation Letter \$50.00 Case 20-00694-dd Doc 13 Filed 02/27/20 Entered 02/27/20 16:09:24 Desc Main Document Page 57 of 58

In re Eria Bridgeman Case No. 20-00694
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Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Drafting Reaffirmation Agreement \$250.00
Filing claim for creditor \$200.00
Forwarding third party correspondence and statements \$50.00
Mail Letter \$50.00
Mailing costs to serve creditors \$1.00
Moratorium (temp suspension of bankruptcy payments) \$250.00
Motion Establish Tax Claim \$350.00
Motion reinstate stay \$350.00
Motion Substitute Attorney \$150.00
Motion to Abandon Property \$150.00

Motion to incur debt (real estate complex) \$150.00 hr atty.

Motion to incur debt (real estate w/o lien avoidance) \$150.00 hr atty.

Motion to Reconsider Dismissal for non-payment \$250.00

Motion to reinstate the case \$250.00 Motion to sell personal property \$250.00

Motion to sell real property \$400.00 Motion to Substitute Collateral \$350.00

Motion to incur debt (personal property) \$350.00

Notice of Appearance \$150.00

Objection to creditor claim \$300.00

Plan Modification after confirmation \$350.00

Resolution of Petition to Dismiss prior to hearing \$150.00

Resumption of Payment Order \$350.00

Services not related to bankruptcy case EXCLUDED AND NEGOTIATED

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 27, 2020	
Date	

/s/ David C. Gaffney
David C. Gaffney 10112

Signature of Attorney
Gaffney Law Firm, P.A.

P.O. Box 3966

West Columbia, SC 29171-3966 803-781-0500 Fax: 803-454-9900 david@gaffneylawfirm.com

Name of law firm

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court District of South Carolina

In re	Eria Bridgeman		Case No.	20-00694
		Debtor(s)	Chapter	13

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptev Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via identical iı form.

CM/EC	F, or conventionally filed in a typed hard	d copy scannable format which has been compared to, and contains d lists which are being filed at this time or as they currently exist in draft in
	Master mailing list of creditors submitted v	ia:
	(a) computer diskette	
	(b) scannable hard cop (number of sheets submitted	
	(c) X electronic version file	d via CM/ECF
Date:	February 27, 2020	/s/ Eria Bridgeman
		Eria Bridgeman
		Signature of Debtor
Date:	February 27, 2020	/s/ David C. Gaffney
		Signature of Attorney
		David C. Gaffney 10112
		Gaffney Law Firm, P.A.
		P.O. Box 3966
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